

Application # _____
Date Filed _____
Receipt # _____

CITY OF MILTON-FREEWATER

REPLAT APPLICATION

APPLICANT _____

ADDRESS _____

PHONE NO. _____

MAP AND TAX LOT NUMBERS OF AFFECTED PARCELS: _____

ADDRESS _____

CURRENT USE _____ CURRENT ZONE _____

PROPOSED USE _____

ATTACH DRAWING TO SCALE INDICATING CURRENT AND PROPOSED NUMBER OF LOTS AND PROPOSED AREA OF EACH LOT.

ADDITIONAL COMMENTS/EXPLANATION _____

Any adjustments not mentioned are not included in the Permit. No Title Search has been or will be conducted by the City. The City makes no representations as to possible covenants contained within Deeds or Conveyances.

I/We hereby certify that the above information is correct and understand that issuance of a permit based on this application will not excuse me from complying with effective Ordinances and Resolutions of the City of Milton-Freewater and Statutes of Oregon, despite any errors on the part of the City in checking this application.

All owners must sign. Attach additional pages if necessary

Signature of Owner _____ Date _____
Name (Please Print) _____

Signature of Owner _____ Date _____
Name (Please Print) _____

Signature of Owner _____ Date _____
Name (Please Print) _____

City Approval by _____ Date _____